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U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL

 DUPLICATE

Address to: Commissioner for Patents Box PATENT APPLICATION Washington, DC 20231	Attorney Docket No.	BEU/STEPNO
	First Named Inventor (or identifier)	Norman H. STEPNO
	Total Pages	

Transmitted herewith is a patent application under 37 CFR 1.53(b).

Entitled:	SYSTEM, METHOD, AND SOFTWARE FOR REDUCING POSTAGE COSTS BY CONSOLIDATING MAILINGS
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1. Submitted herewith are the following:

28 pages of specification.

1 Abstract.

5 sheets of drawings.

19 claims.

1 Oath/Declaration signed by each inventor.

Preliminary Amendment.

Information Disclosure Statement(s).

pages of Form PTO-1449, and one copy of each document listed thereon.

Assignment of the invention, Cover Sheet, and payment of the \$ _____ recordal fee.

certified copy of application no. _____ filed in _____. Priority is claimed.

1 check in the amount of \$ 355.00 including any assignment recordal fee.

2. SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.

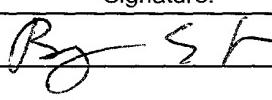
3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.

4. Insert before the first sentence of the specification: -- This application claims the benefit of provisional application number _____ filed _____. --

5. Insert before the first sentence of the specification: -- This application is a Continuation-in-part of nonprovisional application number _____ filed _____. --

6. Other: _____

The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.

THE FILING FEE IS CALCULATED AS FOLLOWS:			Basic Fee:	\$710.00		
Total Claims:	19	- 20 =	X \$18 =			
Independent Claims:	3	- 3 =	X \$80 =			
Correspondence Address: BACON & THOMAS, PLLC 625 Slaters Lane, 4 th Floor Alexandria, VA 22314-1176			Multiple Dependent Claim (add \$270.00):			
			Subtotal:		\$710.00	
			50% Reduction if Small Entity Status:		\$355.00	
Phone: 703-683-0500 Fax: 703-683-1080			Total:	\$355.00		
Date:	Name:		Signature:	Reg. No.		
March 15, 2001	BENJAMIN E. URCIA			33,805		